

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Midwest Values PAC

ADDRESS (number and street) ▼

P.O. Box 583232

☐ Check if different than previously reported. (ACC)

Minneapolis

MN

55458

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00416131

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☒ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

11

04

2014

in the State of

MN

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

in the State of

5. Covering Period

10

01

2014

through

10

15

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Thomas Borman

Signature of Treasurer

Thomas Borman

[Electronically Filed]

Date

10

23

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Midwest Values PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		01		2014

To:

M M	/	D D	/	Y Y Y Y Y
10		15		2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2014</td></tr></table>	Y	Y	Y	Y	Y	2014						<table><tr><td colspan="5">33383.98</td></tr></table>	33383.98				
Y	Y	Y	Y	Y													
2014																	
33383.98																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">12617.30</td></tr></table>	12617.30															
12617.30																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">1030.00</td></tr></table>	1030.00					<table><tr><td colspan="5">177048.05</td></tr></table>	177048.05									
1030.00																	
177048.05																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">13647.30</td></tr></table>	13647.30					<table><tr><td colspan="5">210432.03</td></tr></table>	210432.03									
13647.30																	
210432.03																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">11163.48</td></tr></table>	11163.48					<table><tr><td colspan="5">207948.21</td></tr></table>	207948.21									
11163.48																	
207948.21																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">2483.82</td></tr></table>	2483.82					<table><tr><td colspan="5">2483.82</td></tr></table>	2483.82									
2483.82																	
2483.82																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Midwest Values PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

815.00

95505.00

(ii) Unitemized

215.00

11853.10

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

1030.00

107358.10

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

30500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

1030.00

137858.10

12. Transfers From Affiliated/Other

Party Committees.....

0.00

37400.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

1789.19

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.76

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

1030.00

177048.05

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

1030.00

177048.05

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	6163.48	106448.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6163.48	106448.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	96500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	5000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	5000.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	11163.48	207948.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11163.48	207948.21

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1030.00	137858.10
34. Total Contribution Refunds (from Line 28(d))	0.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1030.00	132858.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	6163.48	106448.21
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	1789.19
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	6163.48	104659.02

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 14

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Midwest Values PAC

Full Name (Last, First, Middle Initial)

A. Terry Bongard

Mailing Address 2800 W 44th Street#308,

City
Minneapolis

State Zip Code
MN 55410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 03 / 2014

Transaction ID : C9441815

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ruth E Dick

Mailing Address 3560 Redwood Ave

City
Los Angeles

State Zip Code
CA 90066

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 03 / 2014

Transaction ID : C9464164

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

c. Fay C Graning

Mailing Address 6100 Westchester Park Drive
Apt 404

City
College Park

State Zip Code
MD 20740

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

10 / 07 / 2014

Transaction ID : C9446534

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

580.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 14
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

Full Name (Last, First, Middle Initial)

A. Nicholas Lavrov

Mailing Address 910 Cerrito St

City
Albany

State
CA

Zip Code
94706-1522

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Real Estate Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

10 / 15 / 2014

Transaction ID : C9464175

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B. Catherine M McCartin

Mailing Address 28 Plainfield Ave

City
Metuchen

State
NJ

Zip Code
08840

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

10 / 15 / 2014

Transaction ID : C9464178

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Thomas McNassar

Mailing Address 32507 181st Ave SE

City
Auburn

State
WA

Zip Code
98092

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 06 / 2014

Transaction ID : C9444318

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

135.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 14
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

Full Name (Last, First, Middle Initial)

A. Gordon Minette

Mailing Address 80 8th Ave
Ste 312

City State Zip Code
New York NY 10011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Producer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 04 / 2014

Transaction ID : C9464168

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

815.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 14

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

Full Name (Last, First, Middle Initial)

A. ADP, Inc.

Mailing Address 504 Clinton Center Dr Ste. 4400

City Clinton State MS Zip Code 39056

Purpose of Disbursement
Payroll Service Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y
10 / 10 / 2014

Transaction ID : D478526

Amount of Each Disbursement this Period

61.74

Full Name (Last, First, Middle Initial)

B. Bankcard Assoc

Mailing Address 2221 W. Broadway

City Fort Worth State TX Zip Code 76112

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y
10 / 03 / 2014

Transaction ID : D478527

Amount of Each Disbursement this Period

106.58

Full Name (Last, First, Middle Initial)

C. Blue State Digital, LLC

Mailing Address 1000 Vermont Avenue, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Web Site

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y
10 / 10 / 2014

Transaction ID : D478528

Amount of Each Disbursement this Period

205.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

373.32

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 14

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

Full Name (Last, First, Middle Initial)

A. Capital Accounting Services

Mailing Address 620 Wesley Commons Drive

City Minneapolis State MN Zip Code 55427

Purpose of Disbursement
Compliance Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 10 / 2014

Transaction ID : D478529

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Hudson Bay of Illinois

Mailing Address 11032 Vera Cruz Ave N

City Champlin State MN Zip Code 55316

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 10 / 2014

Transaction ID : D478530

Amount of Each Disbursement this Period

314.27

Full Name (Last, First, Middle Initial)

C. Merchant Services

Mailing Address 890 Mountain Ave.

City New Providence State NJ Zip Code 07974

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2014

Transaction ID : D478531

Amount of Each Disbursement this Period

27.99

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1842.26

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Midwest Values PAC

Category/
Type

State: District:

Category/
Type

69.00

State: District:

Category/
Type

15.62

State: District:

Age Group	Percentage
18-24	100.00
25-34	100.00
35-44	100.00
45-54	100.00
55-64	100.00
65-74	100.00
75-84	100.00
85+	144.62

[illegible]

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

Full Name (Last, First, Middle Initial)

A. Emily M Smith

Mailing Address 415 Oak Grove Street, #521

City Minneapolis State MN Zip Code 55403

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 15 2014

Transaction ID : D477114

Amount of Each Disbursement this Period

1199.44

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

6139.48

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

Full Name (Last, First, Middle Initial)

A. NORTH DAKOTA DEMOCRATIC-NONPARTISAN LEAGUE PARTY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Mailing Address 1902 E DIVIDE AVE

City	State	Zip Code
Bismarck	ND	58501

Transaction ID : D478525Purpose of Disbursement
Contribution - Federal

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

5000.00
